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### MONITORING OF THE METABOLIC SYNDROME IN PSYCHIATRIC INPATIENTS

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In this naturalistic observational study carried out in an inpatient treatment setting we as yet surveyed the parameters of the metabolic syndrome. A weekly monitoring procedure was implemented. The analysis included data of 350 patients over a time of 12 weeks. The last observation carried forward method was applied. Additionally we are evaluating the informative value of visceral body fat percentage as measured by a body composition analyzer. The patients showed a weight increase over the first 12 weeks (mean increase: 0.87 kg,  $p < .001$ ) as well as an increase of the body mass index (mean increase: 0.45 kg/m<sup>2</sup>,  $p < .001$ ). Accordingly, waist circumference (mean increase: 1.06 cm,  $p = .007$ ) and visceral fat index (mean increase: 0.19,  $p = .007$ ) increased. No worsening of fasting glucose and blood lipid concentrations was detected. Spearmans coefficient indicated correlations between visceral fat index and body mass index ( $\rho = .77$ ;  $p < .001$ ), waist circumference ( $\rho = .70$ ;  $p < .001$ ), and triglyceride concentrations ( $\rho = .39$ ;  $p < .001$ ). Correlations between visceral fat index and fasting glucose ( $\rho = .18$ ;  $p = .019$ ), and visceral fat index and total cholesterol ( $\rho = .16$ ;  $p = .049$ ) were weak but also significant. In contrast, the HDL cholesterol showed a negative relation with  $\rho < -.39$  at each point in time ( $p < .001$ ).

We conclude that psychiatric patients are at increased risk for the development of metabolic alterations during inpatient treatment. The possible underlying mechanisms of this interaction are discussed.